

**City of Rockville  
Boards and Commissions  
Application of Expression of Interest**

**Date:** \_\_\_\_\_

**Board/Commission Interested In:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Apt.#** \_\_\_\_\_

\_\_\_\_\_ **Zip** \_\_\_\_\_

**Home Phone:** ( ) \_\_\_\_\_ **Work Phone** ( ) \_\_\_\_\_

**E-Mail:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Note:** Work phone numbers are for staff use only.

**Summary of Work Experience:** \_\_\_\_\_

\_\_\_\_\_

**Experience:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Education/Training:** \_\_\_\_\_

\_\_\_\_\_

**Volunteer Activities:** \_\_\_\_\_

\_\_\_\_\_

**Professional Affiliations/Memberships:** \_\_\_\_\_

\_\_\_\_\_

**Please describe your interest in serving on this Board/Commission** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please indicate here [ ] yes or [ ] no whether or not the City may give elected officials who serve Rockville (other than the Mayor and Council) your name and address. This information would not be used for any fund-raising, “issues” mailings or campaign mailings. No phone numbers will be given.**

**Please Return Form and Resume, if available, to:** Mayor and Council  
c/o City Clerk's Office  
111 Maryland Avenue  
Rockville, MD 20850  
240-314-8280